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Nursing Facilities in Massachusetts: 1994 Update

February 1996

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*A Report of the
Massachusetts Rate Setting Commission*

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Commonwealth of Massachusetts



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Nursing Facilities in Massachusetts: 1994 Update

February 1996

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Table of Contents

Section 1: Facility Demographics, Utilization, and Occupancy (1990 - 1994) ♦ 1

Table 1.1: Distribution of Nursing Facilities
Table 1.2: Distribution of Nursing Facility Beds
Table 1.3: Mean Nursing Facility Total Utilization Percentage
Table 1.4: Number of Nursing Facilities Reporting Resident Occupancy for Identified Resident-Funding Sources
Table 1.5: Mean Nursing Facility Bed-Day Occupancy Percentage for Identified Resident-Funding Sources
Table 1.6: Mean Nursing Facility Bed-Day Occupancy Percentage by Facility Profit Status for Identified Resident-Funding Sources
Table 1.7: Mean Nursing Facility Bed-Day Occupancy Percentage by Facility Management Structure for Identified Resident-Funding Sources

Section 2: Expenses, Revenues, and Financial Structure (1990 - 1994) ♦ 9

Table 2.1: Median Nursing Facility Total Operating Expense Per Diem
Table 2.2: Median Nursing Facility Administrative Expense Per Diem

Table 2.3: Median Nursing Facility Director of Nurses Expense Per Diem

Table 2.4: Median Nursing Facility Nursing Expense Per Diem

Table 2.5: Median Nursing Facility Variable Expense Per Diem

Table 2.6: Median Nursing Facility Fixed Expense Per Diem

Table 2.7: Median Nursing Facility Other Operating Expense Per Diem

Table 2.8: Nursing Facilities Reporting Nursing Pool Expenses

Table 2.9: Median Nursing Facility Employer's Health Insurance Expense per \$100 of Employee Gross Wages

Table 2.10: Median Nursing Facility Employer's Worker's Compensation Expense per \$100 of Employee Gross Wages

Table 2.11: Median Nursing Facility Employer's Pension Plan Expense per \$100 of Employee Gross Wages

Table 2.12: Median Nursing Facility Total Revenue Per Diem

Table 2.13: Median Nursing Facility Medicare Revenue Per Diem

Table 2.14: Median Nursing Facility Private Revenue Per Diem

Table 2.15: Median Nursing Facility Medicaid Revenue Per Diem

Table 2.16: Median Nursing Facility Quick Ratio Values

Table 2.17: Median Nursing Facility Current Ratio Values

Table 2.18: Median Nursing Facility (Long-Term) Debt to Asset Ratio Values

Table 2.19: Median Nursing Facility Debt to Asset Ratio Values

Table 2.20: Median Nursing Facility Return on Assets Ratio Values

Section 3: Resident Demographics and Clinical Characteristics (1991 - 1994) ♦ 31

Table 3.1: Proportion of Medicaid-Funded Nursing Facility Residents by Demographic Indicators

Table 3.2: Proportion of Medicaid-Funded Nursing Facility Residents by Health and Behavior Indicators

Table 3.3: Proportion of Medicaid-Funded Nursing Facility Residents for Certain Activities of Daily Living (ADLs)

Table 3.4:	Proportion of Medicaid-Funded Nursing Facility Residents by Number of ADL Dependencies
Table 3.5:	Mean MMQ Score for Medicaid-Funded Nursing Facility Residents by Demographic Indicators
Table 3.6:	Ten Most Frequent Primary Diagnoses of Medicaid-Funded Nursing Facility Residents
Table 3.7:	Proportion of Medicaid-Funded Nursing Facility Residents with a Primary Diagnosis of Alzheimer's Disease by Demographic Indicators
Table 3.8:	Proportion of Medicaid-Funded Nursing Facility Residents with a Primary Diagnosis of Alzheimer's Disease by Number of ADL Dependencies

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Nursing Facilities in Massachusetts 1990-1994

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Section 1: Facility Demographics, Utilization and Occupancy (1990 - 1994)

Table 1.1 Distribution of Nursing Facilities (1990 - 1994)

	1990		1991		1992		1993		1994		
	(n)	(%)	(n)	(%)	(n)	(%)	(n)	(%)	(n)	(%)	
Statewide	530	100%	521	100%	529	100%	514	100%	518	100%	
Health Service Area	I	74	14.0%	73	14.0%	74	14.0%	71	13.8%	72	13.9%
	II	70	13.2%	66	12.7%	68	12.9%	70	13.6%	68	13.1%
	III	47	8.9%	47	9.0%	48	9.1%	46	9.0%	45	8.7%
	IV	175	33.0%	174	33.4%	175	33.1%	166	32.3%	169	32.6%
	V	106	20.0%	104	20.0%	105	19.8%	104	20.2%	105	20.3%
	VI	58	10.9%	57	10.9%	59	11.2%	57	11.1%	59	11.4%
Level of Care	Skilled	55	10.4%	64	12.3%	81	15.3%	82	16.0%	90	17.4%
	Intermediate	167	31.5%	156	29.9%	150	28.4%	133	25.9%	127	24.5%
	Multi-level	304	57.4%	297	57.0%	294	55.6%	296	57.5%	297	57.3%
	Pediatric	4	0.8%	4	0.8%	4	0.8%	3	0.6%	4	0.8%
Profit Status	For-Profit	421	79.4%	402	77.2%	424	80.2%	402	78.2%	392	75.7%
	Non-Profit	109	20.6%	119	22.8%	105	19.8%	112	21.8%	126	24.3%
Management Structure	Management Co.	233	44.0%	226	43.4%	239	45.2%	203	39.5%	254	49.0%
	Independent	297	56.0%	295	56.6%	290	54.8%	311	60.5%	264	51.0%

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing RSC-1 documents with the MRSC; statewide and by category.

% values represent the proportion of facilities represented in each category.

Table 1.2 Distribution of Nursing Facility Beds (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	(%)	(n)	(%)	(n)	(%)	(n)	(%)	(n)	(%)
Statewide	49,634	100%	49,952	100%	50,768	100%	50,205	100%	51,356	100%
Health Service Area										
I	7,561	15.2%	7,665	15.3%	7,824	15.4%	7,785	15.5%	8,146	15.9%
II	6,514	13.1%	6,335	12.7%	6,478	12.8%	6,568	13.1%	6,439	12.5%
III	4,657	9.4%	4,737	9.5%	4,795	9.4%	4,723	9.4%	4,720	9.2%
IV	16,724	33.7%	16,583	33.2%	16,904	33.3%	16,281	32.4%	17,047	33.2%
V	9,639	19.4%	9,863	19.7%	9,762	19.2%	9,948	19.8%	10,058	19.6%
VI	4,539	9.2%	4,769	9.6%	5,005	9.9%	4,900	9.8%	4,945	9.6%
Level of Care										
Skilled	4,590	9.2%	5,706	11.4%	7,199	14.2%	7,504	14.9%	7,679	15.0%
Intermediate	8,175	16.5%	7,883	15.8%	7,627	15.0%	6,540	13.0%	6,230	12.1%
Multi-level	36,368	73.3%	35,862	71.8%	35,439	69.8%	35,824	71.4%	36,944	71.9%
Pediatric	501	1.0%	501	1.0%	503	1.0%	337	0.7%	503	1.0%
Profit Status										
For-Profit	37,515	75.6%	36,608	73.3%	38,755	76.3%	37,813	75.3%	37,382	72.8%
Non-Profit	12,119	24.4%	13,344	26.7%	12,013	23.7%	12,392	24.7%	13,974	27.2%
Management Structure										
Management Co.	24,969	50.3%	24,433	48.9%	25,561	50.3%	21,743	43.3%	27,063	52.7%
Independent	24,665	49.7%	25,519	51.1%	25,207	49.7%	28,462	56.7%	24,293	47.3%

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of nursing beds for facilities filing RSC-1 documents with the MRSC; statewide and by category.

% values represent the proportion of facilities represented in each category.

Table 1.3 Mean Nursing Facility Total Utilization Percentage (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	(mean)	(n)	(mean)	(n)	(mean)	(n)	(mean)	(n)	(mean)
Statewide	518	96.2%	515	96.6%	516	96.3%	513	96.1%	518	95.2%
Health Service Area										
I	72	96.5%	72	97.0%	73	95.8%	71	95.6%	72	94.0%
II	68	97.6%	65	97.7%	65	97.5%	69	96.5%	68	95.3%
III	46	97.5%	47	97.6%	47	96.6%	46	96.2%	45	95.9%
IV	173	95.7%	172	96.3%	170	95.8%	166	96.0%	169	95.3%
V	104	94.8%	102	95.4%	104	96.4%	104	96.1%	105	95.1%
VI	55	97.5%	57	97.0%	57	97.0%	57	96.7%	59	95.9%
Level of Care										
Skilled	52	95.3%	61	95.5%	75	95.4%	82	94.3%	90	91.9%
Intermediate	164	95.4%	156	95.7%	147	95.4%	132	96.5%	127	95.8%
Multi-level	298	96.8%	294	97.2%	290	97.0%	296	96.5%	297	95.9%
Pediatric	4	98.9%	4	99.2%	4	97.8%	3	97.7%	4	97.2%
Profit Status										
For-Profit	414	96.3%	399	96.6%	416	96.4%	401	96.5%	392	96.0%
Non-Profit	104	95.8%	116	96.4%	100	96.2%	112	94.6%	126	92.6%
Management Structure										
Management Co.	228	96.8%	225	97.0%	234	96.8%	202	96.4%	254	94.9%
Independent	290	95.7%	290	96.3%	282	96.0%	311	96.0%	264	95.5%

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n represents the number of facilities reporting accurate utilization data; those <10% or >100% were excluded.

% values represent the mean utilization percentage for all facilities reporting accurate occupancy data; statewide and by category.

Table 1.4 Number of Nursing Facilities Reporting Resident Occupancy for Identified Resident-Funding Sources (1990 - 1994)

	1990 (n)	1991 (n)	1992 (n)	1993 (n)	1994 (n)
Statewide	530	521	528	513	518
Payment Source					
Medicaid	528	518	524	511	514
Non-Mass. Medicaid	29	32	32	37	33
Medicare	314	332	368	390	429
Commission of the Blind	312	303	312	306	268
Veteran's Administration	136	122	130	129	126
Private	517	505	516	502	508

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities reporting payment for residents receiving nursing home services by the indicated sources.

Table 1.5 Mean Nursing Facility Bed-Day Occupancy Percentage for Identified Resident-Funding Sources (1990 - 1994)

Statewide	1990 (n) = 530	1991 (n) = 521	1992 (n) = 528	1993 (n) = 513	1994 (n) = 518
Payment Source	mean occupancy %	mean occupancy %	mean occupancy %	mean occupancy %	mean occupancy %
Medicaid	74.2%	74.5%	73.5%	72.3%	71.2%
Non-Mass. Medicaid	1.6%	1.8%	1.8%	2.0%	1.5%
Medicare	2.0%	2.8%	4.7%	6.9%	8.8%
Commission of the Blind	1.5%	1.4%	1.4%	1.3%	1.2%
Veteran's Administration	1.0%	1.0%	1.0%	0.9%	1.1%
Private	19.7%	18.5%	17.6%	16.6%	16.2%

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the mean bed-day occupancy for all facilities reporting resident days funded by the indicated payment source.

Mean occupancy percentages are calculated by dividing the number of resident days for each payment source per facility by the total number of resident days for all payment sources per facility; including zero values.

**Table 1.6 Mean Nursing Facility Bed-Day Occupancy Percentage
by Facility Profit Status for Identified Resident-Funding Sources (1990 - 1994)**

Statewide	1990 (n) = 530		1991 (n) = 521		1992 (n) = 528		1993 (n) = 513		1994 (n) = 518	
	mean occup. %		mean occup. %		mean occup. %		mean occup. %		mean occup. %	
Facility Profit Status	For Profit (n)=421	Non Profit (n)=109	For Profit (n)=402	Non Profit (n)=119	For Profit (n)=423	Non Profit (n)=105	For Profit (n)=401	Non Profit (n)=112	For Profit (n)=392	Non Profit (n)=126
Payment Source										
Medicaid	75.3%	70.1%	75.6%	70.6%	74.5%	69.4%	74.0%	66.8%	73.9%	62.8%
Non-Mass. Medicaid	2.0%	0.0%	2.4%	0.0%	2.2%	0.0%	2.3%	0.1%	1.9%	0.0%
Medicare	1.6%	3.6%	2.3%	4.6%	4.1%	7.5%	5.7%	11.0%	6.9%	14.8%
Commission of the Blind	1.4%	1.8%	1.3%	1.7%	1.3%	1.7%	1.3%	1.6%	1.2%	1.4%
Veteran's Administration	0.9%	1.3%	0.9%	1.3%	0.9%	1.4%	1.0%	0.9%	1.1%	1.1%
Private	18.8%	23.2%	17.5%	21.8%	17.0%	20.0%	15.7%	19.6%	15.0%	19.8%

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the mean bed-day occupancy for all facilities reporting resident days funded by the indicated payment source.

Mean occupancy percentages are calculated by dividing the number of resident days for each payment source per facility by the total number of resident days for all payment sources per facility; including zero values.

**Table 1.7 Mean Nursing Facility Bed-Day Occupancy Percentage
by Facility Management Structure for Identified Resident-Funding Sources (1990 - 1994)**

Statewide	1990 (n) = 530 mean occup. %	1991 (n) = 521 mean occup. %	1992 (n) = 528 mean occup. %	1993 (n) = 513 mean occup. %	1994 (n) = 518 mean occup. %
Facility Management Structure	Mgt. Co. Indep. (n)=233 (n)=297	Mgt. Co. Indep. (n)=226 (n)=295	Mgt. Co. Indep. (n)=238 (n)=290	Mgt. Co. Indep. (n)=202 (n)=311	Mgt. Co. Indep. (n)=254 (n)=264
Payment Source					
Medicaid	72.1%	72.5%	71.8%	72.1%	69.2%
Non-Mass. Medicaid	3.0%	3.4%	2.1%	2.7%	2.0%
Medicare	3.1%	3.7%	6.0%	7.3%	10.2%
Commission of the Blind	1.6%	1.4%	1.5%	1.5%	1.1%
Veteran's Administration	1.3%	1.5%	1.4%	1.4%	1.5%
Private	18.9%	17.5%	17.2%	15.0%	16.0%
					73.1%
					0.9%
					7.6%
					1.3%
					0.7%
					16.3%

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the mean bed-day occupancy for all facilities reporting resident days funded by the indicated payment source.

Mean occupancy percentages are calculated by dividing the number of resident days for each payment source per facility by the total number of resident days for all payment sources per facility; including zero values.

Section 2: Expenses, Revenues and Financial Structure (1990 - 1994)

Table 2.1 Median Nursing Facility Total Operating Expense Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994		
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median	
Statewide	528	\$94.58	520	\$100.47	527	\$105.15	512	\$111.67	516	\$118.09	
Health Service Area	I	73	\$87.30	73	\$94.61	74	\$99.90	71	\$104.35	72	\$113.66
	II	70	\$88.84	66	\$96.60	67	\$103.82	69	\$107.71	67	\$115.27
	III	47	\$99.81	47	\$101.71	48	\$105.90	46	\$112.68	45	\$117.35
	IV	175	\$96.68	174	\$104.39	174	\$107.81	166	\$115.06	169	\$123.24
	V	106	\$91.65	104	\$100.07	105	\$104.50	103	\$110.92	104	\$114.87
	VI	57	\$93.48	56	\$98.20	59	\$103.60	57	\$112.05	59	\$115.98
Level of Care	Skilled	53	\$114.98	62	\$125.70	79	\$134.57	80	\$139.39	88	\$153.39
	Intermediate	166	\$71.42	56	\$77.98	150	\$81.59	133	\$85.80	127	\$92.49
	Multi-level	305	\$102.01	98	\$107.10	294	\$110.60	296	\$115.41	297	\$122.46
	Pediatric	4	\$167.19	4	\$177.04	4	\$184.59	3	\$214.43	4	\$195.71
Profit Status	For-Profit	421	\$89.88	402	\$96.04	424	\$101.31	402	\$106.71	392	\$112.86
	Non-Profit	107	\$108.12	118	\$113.33	103	\$119.79	110	\$130.40	124	\$139.40
Management Structure	Management Co.	232	\$97.53	226	\$103.77	239	\$106.72	203	\$111.59	253	\$119.57
	Independent	296	\$86.34	294	\$94.65	288	\$103.35	309	\$112.05	263	\$115.06

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem expense for this variable; statewide and by category.

Table 2.2 Median Nursing Facility Administrative Expense Per Diem (1990 - 1994)

		1990		1991		1992		1993		1994	
		(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide		528	\$6.32	520	\$7.01	527	\$7.32	512	\$7.89	516	\$8.60
Health Service Area	I	73	\$5.28	73	\$5.94	74	\$6.31	71	\$6.46	72	\$7.54
	II	70	\$5.53	66	\$6.34	67	\$6.52	69	\$6.62	67	\$7.56
	III	47	\$7.04	47	\$8.00	48	\$8.64	46	\$8.88	45	\$9.49
	IV	175	\$6.29	174	\$7.00	174	\$7.33	166	\$7.64	169	\$8.64
	V	106	\$5.99	104	\$6.67	105	\$7.14	103	\$7.60	104	\$7.94
	VI	57	\$7.28	56	\$7.74	59	\$8.41	57	\$8.71	59	\$9.33
Level of Care											
	Skilled	53	\$7.05	62	\$8.17	79	\$9.27	80	\$8.60	88	\$10.23
	Intermediate	166	\$4.85	156	\$5.86	150	\$6.22	133	\$6.58	127	\$7.31
	Multi-level	305	\$6.67	298	\$7.13	294	\$7.53	296	\$8.04	297	\$8.84
	Pediatric	4	\$5.88	4	\$6.94	4	\$7.80	3	\$14.23	4	\$10.65
Profit Status											
	For-Profit	421	\$6.38	402	\$7.17	424	\$7.53	402	\$7.81	392	\$8.68
	Non-Profit	107	\$6.05	118	\$6.30	103	\$6.99	110	\$7.99	124	\$8.37
Management Structure											
	Management Co.	232	\$7.27	226	\$8.29	239	\$8.51	203	\$8.71	253	\$9.44
	Independent	296	\$5.23	294	\$5.87	288	\$6.20	309	\$7.17	263	\$7.47

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem expense for this variable; statewide and by category.

Table 2.3 Median Nursing Facility Director of Nurses Expense Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide	528	\$1.16	520	\$1.55	527	\$1.65	512	\$1.70	516	\$1.71
Health Service Area										
I	73	\$1.09	73	\$1.36	74	\$1.39	71	\$1.47	72	\$1.46
II	70	\$1.14	66	\$1.59	67	\$1.66	69	\$1.78	67	\$1.75
III	47	\$1.04	47	\$1.55	48	\$1.64	46	\$1.77	45	\$1.70
IV	175	\$1.12	174	\$1.70	174	\$1.82	166	\$1.82	169	\$1.86
V	106	\$1.23	104	\$1.51	105	\$1.60	103	\$1.68	104	\$1.71
VI	57	\$1.18	56	\$1.92	59	\$1.77	57	\$1.81	59	\$2.08
Level of Care										
Skilled	53	\$1.77	62	\$1.96	79	\$1.95	80	\$1.99	88	\$2.04
Intermediate	166	\$0.58	156	\$2.59	150	\$2.90	133	\$3.10	127	\$3.39
Multi-level	305	\$1.27	298	\$1.40	294	\$1.39	296	\$1.48	297	\$1.48
Pediatric	4	\$1.52	4	\$1.58	4	\$1.54	3	\$2.28	4	\$1.57
Profit Status										
For-Profit	421	\$1.16	402	\$1.59	424	\$1.69	402	\$1.72	392	\$1.74
Non-Profit	107	\$1.12	118	\$1.46	103	\$1.45	110	\$1.66	124	\$1.67
Management Structure										
Management Co.	232	\$1.19	226	\$1.46	239	\$1.43	203	\$1.56	253	\$1.58
Independent	296	\$1.07	294	\$1.87	288	\$1.98	309	\$1.93	263	\$2.05

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem expense for this variable; statewide and by category.

Table 2.4 Median Nursing Facility Nursing Expense Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide	528	\$42.20	520	\$44.87	527	\$46.49	512	\$48.35	516	\$49.91
Health Service Area										
I	73	\$37.98	73	\$39.38	74	\$41.35	71	\$42.00	72	\$45.69
II	70	\$42.01	66	\$45.55	67	\$45.50	69	\$47.61	67	\$49.54
III	47	\$44.87	47	\$45.60	48	\$47.40	46	\$49.18	45	\$48.36
IV	175	\$44.87	174	\$46.79	174	\$48.06	166	\$50.00	169	\$52.41
V	106	\$43.33	104	\$45.69	105	\$47.37	103	\$49.65	104	\$49.79
VI	57	\$41.41	56	\$43.29	59	\$46.27	57	\$47.53	59	\$50.13
Level of Care										
Skilled	53	\$53.43	62	\$56.14	79	\$57.93	80	\$59.03	88	\$63.02
Intermediate	166	\$31.54	156	\$33.12	150	\$34.84	133	\$36.84	127	\$39.61
Multi-level	305	\$46.32	298	\$47.33	294	\$48.70	296	\$50.38	297	\$51.88
Pediatric	4	\$74.25	4	\$73.18	4	\$79.83	3	\$83.64	4	\$77.98
Profit Status										
For-Profit	421	\$41.09	402	\$43.57	424	\$45.21	402	\$46.36	392	\$47.74
Non-Profit	107	\$49.64	118	\$50.46	103	\$54.71	110	\$56.56	124	\$57.60
Management Structure										
Management Co.	232	\$44.32	226	\$45.70	239	\$46.81	203	\$47.76	253	\$50.19
Independent	296	\$39.22	294	\$42.02	288	\$44.72	309	\$48.54	263	\$49.22

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem expense for this variable; statewide and by category.

Table 2.5 Median Nursing Facility Variable Expense Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994	
Statewide	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Health Service Area	528	\$32.15	520	\$34.39	527	\$37.39	512	\$41.10	516	\$45.15
	73	\$30.76	73	\$32.07	74	\$36.59	71	\$40.91	72	\$44.42
	70	\$30.95	66	\$34.33	67	\$36.35	69	\$39.32	67	\$45.14
	47	\$32.31	47	\$35.38	48	\$38.88	46	\$41.63	45	\$45.17
	175	\$32.81	174	\$34.68	174	\$37.47	166	\$42.74	169	\$46.39
	106	\$33.51	104	\$35.20	105	\$37.39	103	\$40.63	104	\$45.58
Level of Care	57	\$30.64	56	\$34.20	59	\$36.29	57	\$39.56	59	\$43.18
	53	\$40.21	62	\$41.61	79	\$47.64	80	\$50.91	88	\$59.37
	166	\$26.88	156	\$28.56	150	\$30.46	133	\$32.90	127	\$35.26
	305	\$33.56	298	\$35.89	294	\$39.07	296	\$42.97	297	\$46.57
	4	\$54.35	4	\$59.10	4	\$59.71	3	\$64.43	4	\$64.26
Profit Status	421	\$30.76	402	\$32.79	424	\$36.16	402	\$39.56	392	\$43.37
	107	\$38.82	118	\$40.96	103	\$43.97	110	\$48.59	124	\$53.20
Management Structure	232	\$32.09	226	\$35.05	239	\$37.76	203	\$41.47	253	\$46.03
	296	\$32.15	294	\$33.81	288	\$36.56	309	\$40.63	263	\$42.95

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem expense for this variable; statewide and by category.

Table 2.6 Median Nursing Facility Fixed Expense Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide	528	\$7.08	520	\$7.13	527	\$7.23	512	\$7.15	516	\$7.38
Health Service Area										
I	73	\$8.58	73	\$8.71	74	\$8.48	71	\$8.62	72	\$7.57
II	70	\$6.16	66	\$6.43	67	\$6.34	69	\$7.14	67	\$7.19
III	47	\$9.39	47	\$8.05	48	\$8.46	46	\$8.13	45	\$7.27
IV	175	\$7.19	174	\$6.93	174	\$7.32	166	\$7.50	169	\$8.19
V	106	\$6.07	104	\$6.51	105	\$6.28	103	\$6.50	104	\$6.17
VI	57	\$6.59	56	\$7.46	59	\$7.63	57	\$6.84	59	\$7.47
Level of Care										
Skilled	53	\$9.69	62	\$10.98	79	\$12.33	80	\$13.48	88	\$14.04
Intermediate	166	\$4.04	156	\$4.07	150	\$3.92	133	\$4.30	127	\$3.96
Multi-level	305	\$9.33	298	\$9.15	294	\$8.66	296	\$8.84	297	\$8.51
Pediatric	4	\$5.87	4	\$6.69	4	\$5.30	3	\$7.26	4	\$5.34
Profit Status										
For-Profit	421	\$7.08	402	\$6.99	424	\$7.15	402	\$6.64	392	\$6.58
Non-Profit	107	\$6.90	118	\$8.85	103	\$7.42	110	\$10.34	124	\$10.99
Management Structure										
Management Co.	232	\$9.39	226	\$8.77	239	\$8.30	203	\$7.10	253	\$8.44
Independent	296	\$5.86	294	\$6.14	288	\$6.22	309	\$7.21	263	\$6.61

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem expense for this variable; statewide and by category.

Table 2.7 Median Nursing Facility Other Operating Expense Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994	
Statewide	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
	528	\$0.89	520	\$0.98	527	\$0.91	512	\$1.00	516	\$1.10
Health Service Area										
	73	\$0.82	73	\$0.79	74	\$1.08	71	\$1.33	72	\$1.09
	70	\$0.79	66	\$1.03	67	\$1.20	69	\$1.14	67	\$0.94
	47	\$0.82	47	\$0.96	48	\$0.82	46	\$1.21	45	\$0.85
	175	\$0.94	174	\$1.07	174	\$0.84	166	\$0.97	169	\$1.25
	106	\$0.91	104	\$0.88	105	\$0.93	103	\$0.79	104	\$1.17
	57	\$0.82	56	\$0.72	59	\$0.72	57	\$0.80	59	\$0.83
Level of Care										
	53	\$1.44	62	\$1.44	79	\$1.33	80	\$1.67	88	\$2.00
	166	\$0.83	56	\$0.94	150	\$0.54	133	\$0.67	127	\$0.84
	305	\$0.86	98	\$0.88	294	\$1.07	296	\$1.08	297	\$1.07
	4	\$15.71	4	\$20.26	4	\$19.57	3	\$30.26	4	\$5.07
Profit Status										
	421	\$0.87	402	\$0.95	424	\$0.82	402	\$0.96	392	\$0.87
	107	\$1.31	118	\$1.07	103	\$1.44	110	\$1.62	124	\$1.97
Management Structure										
	232	\$0.78	226	\$0.83	239	\$0.75	203	\$0.86	253	\$0.78
	296	\$1.03	294	\$1.06	288	\$1.02	309	\$1.09	263	\$1.46

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem expense for this variable; statewide and by category.

Table 2.8 Nursing Facilities Reporting Nursing Pool Expenses (1990 - 1994)

Statewide All Report Pool-use	1990		1991		1992		1993		1994	
	(n)	(%)	(n)	(%)	(n)	(%)	(n)	(%)	(n)	(%)
	528	100.0%	520	100.0%	527	100.0%	512	100.0%	516	100.0%
	381	72.2%	311	59.8%	287	54.5%	279	54.5%	304	58.9%

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing RSC-1 documents with the MRSC; statewide and for those reporting nursing pool expenses.

% values represent the proportion of facilities which reported nursing pool expenses.

Table 2.9 Median Nursing Facility Employer's Health Insurance Expense Per \$100 of Employee Gross Wages (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide	490	\$4.68	486	\$4.85	492	\$5.11	477	\$5.20	483	\$5.12
Health Service Area										
I	70	\$5.75	71	\$6.39	67	\$6.09	69	\$6.13	70	\$6.06
II	66	\$4.21	61	\$6.45	65	\$4.75	68	\$5.14	66	\$4.60
III	45	\$5.74	44	\$5.24	44	\$4.98	43	\$5.39	41	\$5.81
IV	161	\$4.18	162	\$4.28	161	\$4.70	151	\$4.95	159	\$4.65
V	96	\$5.02	96	\$5.52	99	\$5.49	93	\$5.82	94	\$5.67
VI	52	\$3.91	52	\$4.49	56	\$4.36	53	\$4.11	53	\$4.81
Level of Care										
Skilled	49	\$5.27	58	\$5.59	76	\$5.12	72	\$5.24	80	\$4.94
Intermediate	146	\$3.77	139	\$3.59	133	\$3.72	118	\$3.87	114	\$3.90
Multi-level	291	\$4.89	285	\$5.07	280	\$5.49	284	\$5.62	286	\$5.47
Pediatric	4	\$6.36	4	\$6.96	3	\$7.41	3	\$6.53	3	\$7.43
Profit Status										
For-Profit	386	\$4.46	373	\$4.69	394	\$4.67	368	\$4.84	360	\$4.81
Non-Profit	104	\$5.52	113	\$5.57	98	\$6.28	109	\$6.33	123	\$6.20
Management Structure										
Management Co.	218	\$4.50	210	\$4.84	217	\$4.80	193	\$4.86	238	\$5.00
Independent	272	\$4.74	276	\$4.88	275	\$5.24	284	\$5.61	245	\$5.27

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent facilities reporting expenses in this area to the MRSC; statewide and by category; zero values were excluded.

Median values represent the median employer spending per \$100 of gross employee wages; statewide and by category.

Table 2.10 Median Nursing Facility Employer's Worker's Compensation Expense Per \$100 of Employee Gross Wages (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide	486	\$4.76	488	\$5.82	494	\$5.68	477	\$5.76	483	\$4.94
Health Service Area										
I	69	\$4.75	72	\$6.24	68	\$6.44	69	\$5.73	70	\$5.22
II	66	\$4.79	61	\$6.02	65	\$5.54	68	\$5.71	65	\$4.79
III	45	\$4.90	44	\$5.69	44	\$5.08	43	\$5.51	41	\$4.30
IV	158	\$4.68	162	\$5.44	161	\$5.48	151	\$5.52	159	\$4.56
V	95	\$4.90	97	\$6.62	100	\$6.32	93	\$6.24	94	\$5.43
VI	53	\$4.77	52	\$5.34	56	\$5.58	53	\$5.99	54	\$4.89
Level of Care										
Skilled	48	\$4.62	58	\$5.60	76	\$5.67	72	\$5.72	80	\$4.73
Intermediate	146	\$4.74	141	\$5.40	135	\$5.47	118	\$5.89	114	\$5.06
Multi-level	288	\$4.79	285	\$6.39	280	\$6.03	284	\$5.74	286	\$4.85
Pediatric	4	\$4.80	4	\$6.19	3	\$5.59	3	\$5.77	3	\$4.94
Profit Status										
For-Profit	384	\$4.75	375	\$5.81	396	\$5.66	368	\$5.78	360	\$4.95
Non-Profit	102	\$4.86	113	\$5.97	98	\$5.88	109	\$5.73	123	\$4.79
Management Structure										
Management Co.	214	\$4.85	210	\$6.35	218	\$6.20	193	\$5.82	238	\$4.94
Independent	272	\$4.65	278	\$5.42	276	\$5.46	284	\$5.74	245	\$4.94

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent facilities reporting expenses in this area to the MRSC; statewide and by category; zero values were excluded.

Median values represent the median employer spending per \$100 of gross employee wages; statewide and by category.

Table 2.11 Median Nursing Facility Employer's Pension Plan Expense Per \$100 of Employee Gross Wages (1990 - 1994)

	1990		1991		1992		1993		1994	
Statewide	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
	133	\$1.67	141	\$1.37	173	\$0.96	166	\$1.03	162	\$0.98
Health Service Area										
I	28	\$0.59	30	\$0.67	34	\$0.79	32	\$0.82	33	\$0.88
II	13	\$1.98	16	\$1.14	18	\$0.78	19	\$0.86	14	\$0.88
III	8	\$1.61	9	\$1.06	10	\$0.95	10	\$0.91	7	\$1.07
IV	49	\$1.72	45	\$1.84	59	\$1.20	50	\$1.52	58	\$1.08
V	26	\$1.76	28	\$1.53	33	\$0.98	36	\$1.11	32	\$0.79
VI	9	\$1.67	13	\$3.14	19	\$0.33	19	\$1.03	18	\$1.29
Level of Care										
Skilled	20	\$0.95	23	\$2.96	36	\$0.91	35	\$1.53	41	\$0.94
Intermediate	17	\$1.49	18	\$3.63	23	\$1.22	20	\$1.38	20	\$2.09
Multi-level	95	\$1.85	99	\$1.15	113	\$0.93	111	\$0.88	100	\$0.89
Pediatric	1	\$3.92	1	\$4.17	1	\$4.30	0	\$0.00	1	\$4.26
Profit Status										
For-Profit	75	\$1.46	80	\$1.04	114	\$0.59	106	\$0.73	97	\$0.64
Non-Profit	58	\$2.17	61	\$2.74	59	\$2.89	60	\$2.77	65	\$2.43
Management Structure										
Management Co.	55	\$1.27	56	\$0.79	82	\$0.38	66	\$0.70	76	\$0.71
Independent	78	\$1.88	85	\$2.23	91	\$2.13	100	\$1.85	86	\$1.62

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the facilities reporting expenses in this area to the MRSC; statewide and by category; zero values were excluded.

Median values represent the median; employer spending per \$100 of gross employee wages; statewide and by category.

Table 2.12 Median Nursing Facility Total Revenue Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994		
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median	
Statewide	528	\$99.24	520	\$103.75	526	\$108.44	512	\$115.15	516	\$121.86	
Health Service Area	I	73	\$89.70	73	\$93.57	74	\$97.23	71	\$103.29	72	\$112.27
	II	70	\$94.58	66	\$100.72	67	\$106.81	69	\$112.58	67	\$117.10
	III	47	\$100.59	47	\$106.29	48	\$112.89	46	\$119.19	45	\$121.61
	IV	175	\$104.22	174	\$107.61	173	\$112.09	166	\$119.52	169	\$127.62
	V	106	\$96.48	104	\$102.37	105	\$108.34	103	\$112.16	104	\$119.67
	VI	57	\$100.11	56	\$106.10	59	\$113.78	57	\$118.67	59	\$123.82
Level of Care	Skilled	53	\$116.76	62	\$124.96	78	\$131.96	80	\$138.07	88	\$150.50
	Intermediate	166	\$74.38	156	\$77.67	150	\$82.50	133	\$87.99	127	\$92.85
	Multi-level	305	\$106.27	298	\$110.81	294	\$114.81	296	\$120.24	297	\$126.30
	Pediatric	4	\$173.06	4	\$194.97	4	\$185.69	3	\$224.69	4	\$203.06
Profit Status	For-Profit	421	\$94.68	402	\$99.57	423	\$105.82	402	\$110.35	392	\$116.09
	Non-Profit	107	\$111.72	118	\$114.85	103	\$121.15	110	\$127.49	124	\$138.52
Management Structure	Management Co.	232	\$101.95	226	\$108.94	239	\$112.48	203	\$116.54	253	\$124.89
	Independent	296	\$93.44	294	\$97.04	287	\$102.42	309	\$112.58	263	\$115.66

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem revenue; statewide and by category.

Table 2.13 Median Nursing Facility Medicare Revenue Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide	312	\$94.12	332	\$116.85	365	\$131.79	386	\$147.27	425	\$148.00
Health Service Area										
I	50	\$89.11	54	\$111.61	58	\$115.34	62	\$111.18	64	\$110.81
II	44	\$91.54	49	\$101.48	54	\$123.12	56	\$145.61	60	\$138.28
III	28	\$104.29	30	\$120.88	35	\$132.53	35	\$160.00	37	\$158.23
IV	94	\$92.68	100	\$124.64	111	\$142.96	122	\$149.87	138	\$159.71
V	67	\$100.83	69	\$120.83	72	\$127.05	76	\$151.16	85	\$168.23
VI	29	\$97.74	30	\$117.03	35	\$145.00	35	\$162.52	41	\$160.52
Level of Care										
Skilled	47	\$93.33	60	\$121.73	77	\$142.70	79	\$152.73	87	\$164.28
Intermediate	0	\$0.00	0	\$0.00	6	\$109.07	20	\$102.74	46	\$141.69
Multi-level	264	\$94.37	270	\$115.08	280	\$129.26	286	\$147.80	290	\$150.68
Pediatric	1	\$186.55	2	\$125.43	2	\$100.57	1	\$240.58	2	\$192.28
Profit Status										
For-Profit	237	\$94.24	244	\$118.10	282	\$132.66	294	\$148.34	313	\$146.15
Non-Profit	75	\$93.35	88	\$112.39	83	\$127.38	92	\$143.65	112	\$159.76
Management Structure										
Management Co.	177	\$104.83	182	\$120.92	196	\$140.26	174	\$160.80	227	\$152.87
Independent	135	\$87.00	150	\$106.50	169	\$123.59	212	\$139.73	198	\$146.58

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem revenue from Medicare-funded residents; statewide and by category.

Table 2.14 Median Nursing Facility Private Revenue Per Diem (1990 - 1994)

	1990		1991		1992		1993		1994	
	(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
Statewide	515	\$113.67	505	\$124.46	515	\$132.38	500	\$140.38	505	\$147.55
Health Service Area										
I	73	\$105.45	73	\$112.41	74	\$122.31	71	\$133.03	72	\$143.32
II	68	\$109.70	65	\$121.71	66	\$131.25	66	\$136.56	65	\$141.56
III	47	\$117.72	46	\$126.08	48	\$135.04	46	\$141.84	45	\$149.88
IV	168	\$119.42	170	\$128.08	168	\$136.60	163	\$145.00	165	\$150.94
V	105	\$113.02	99	\$124.61	102	\$133.26	101	\$138.51	101	\$147.22
VI	54	\$114.68	52	\$124.95	57	\$132.07	53	\$140.31	57	\$146.04
Level of Care										
Skilled	53	\$129.69	62	\$139.82	78	\$146.09	77	\$154.91	86	\$165.98
Intermediate	154	\$89.44	142	\$97.13	139	\$102.07	124	\$114.66	119	\$123.09
Multi-level	304	\$121.14	297	\$129.72	294	\$136.61	296	\$144.20	296	\$151.29
Pediatric	4	\$201.90	4	\$253.38	4	\$278.92	3	\$400.00	4	\$280.92
Profit Status										
For-Profit	410	\$111.56	388	\$120.92	413	\$129.85	392	\$138.28	383	\$145.00
Non-Profit	105	\$119.95	117	\$131.50	102	\$141.22	108	\$147.41	122	\$156.80
Management Structure										
Management Co.	230	\$118.84	224	\$127.30	239	\$134.92	202	\$142.35	251	\$151.19
Independent	285	\$107.25	281	\$117.07	276	\$128.93	298	\$135.30	254	\$142.97

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Notes: Median values are the median per diem revenue for privately-funded residents; statewide and by category.

Table 2.15 Median Nursing Facility Medicaid Revenue Per Diem (1990 - 1994)

		1990		1991		1992		1993		1994	
Statewide		(n)	median	(n)	median	(n)	median	(n)	median	(n)	median
HealthService Area	I	525	\$87.99	512	\$91.94	521	\$96.68	506	\$97.50	509	\$100.40
	II	73	\$81.04	72	\$83.67	74	\$89.90	71	\$87.99	71	\$94.72
	III	69	\$82.05	66	\$91.57	66	\$94.63	69	\$93.63	67	\$95.28
	IV	46	\$90.26	46	\$95.45	47	\$102.48	45	\$100.08	44	\$102.31
	V	175	\$93.88	173	\$94.90	172	\$96.67	163	\$100.16	167	\$102.79
	VI	106	\$86.57	101	\$91.79	104	\$94.66	103	\$99.23	104	\$100.42
		56	\$85.79	54	\$90.39	58	\$98.53	55	\$98.35	56	\$98.95
Level of Care	Skilled	53	\$110.44	61	\$111.28	76	\$112.98	77	\$109.49	85	\$116.59
	Intermediate	165	\$67.65	151	\$73.71	148	\$78.45	131	\$82.02	126	\$83.56
	Multi-level	303	\$95.22	296	\$98.51	293	\$100.40	295	\$100.76	294	\$102.50
	Pediatric	4	\$123.03	4	\$135.90	4	\$138.66	3	\$179.87	4	\$171.54
Profit Status	For-Profit	419	\$83.44	395	\$89.52	419	\$93.31	399	\$93.96	391	\$96.36
	Non-Profit	106	\$103.60	117	\$104.67	102	\$105.97	107	\$108.22	118	\$113.46
Management Structure	Management Co.	232	\$91.43	225	\$94.77	237	\$98.29	203	\$98.64	251	\$101.02
	Independent	293	\$80.77	287	\$89.67	284	\$91.32	303	\$96.93	258	\$98.04

Source: Annual RSC-1 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 documents with the MRSC; statewide and by category.

Median values are the median per diem revenue for Medicaid-funded residents; statewide and by category.

Table 2.16 Median Nursing Facility Quick Ratio Values (1990 - 1994)

	1990 (n) = 521 (%)	1991 (n) = 512 (%)	1992 (n) = 519 (%)	1993 (n) = 505 (%)	1994 (n) = 512 (%)
Statewide	100% 0.775	100% 0.797	100% 0.789	100% 0.816	100% 0.823
Health Service Area					
I	13.6% 0.909	13.7% 1.093	13.7% 0.973	13.3% 0.949	13.9% 0.851
II	13.4% 0.832	12.9% 1.128	12.9% 0.869	13.9% 0.942	13.3% 0.817
III	8.8% 0.749	9.0% 0.889	9.1% 0.966	8.9% 0.902	8.6% 0.941
IV	33.6% 0.795	34.0% 0.674	33.5% 0.660	32.9% 0.749	33.0% 0.758
V	20.0% 0.686	20.0% 0.764	20.0% 0.716	20.4% 0.692	20.3% 0.741
VI	10.6% 0.685	10.4% 0.889	10.8% 1.261	10.7% 1.138	10.9% 1.044
Level of Care					
Skilled	10.2% 0.760	11.9% 0.696	15.0% 0.682	16.0% 0.643	17.4% 0.740
Intermediate	31.5% 0.827	29.9% 0.777	28.3% 0.723	25.7% 0.755	24.4% 0.774
Multi-level	57.5% 0.776	57.4% 0.833	55.9% 0.857	57.6% 0.885	57.4% 0.858
Pediatric	0.8% 1.009	0.8% 1.587	0.8% 1.948	0.6% 3.158	0.8% 1.895
Profit Status					
For-Profit	80.2% 0.735	77.9% 0.732	81.1% 0.705	79.0% 0.770	76.6% 0.795
Non-Profit	19.8% 1.193	22.1% 1.356	18.9% 1.466	21.0% 1.041	23.4% 1.099
Management Structure					
Management Co.	44.1% 0.653	43.6% 0.688	45.5% 0.632	39.6% 0.735	49.4% 0.778
Independent	55.9% 0.940	56.4% 0.967	54.5% 0.889	60.4% 0.908	50.6% 0.914

Source: Annual RSC-1 and RSC-2 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 and RSC-2 documents with the MRSC, statewide.

% values represent the proportion of facilities in each category. Ratio values are the median ratio value for this variable; statewide and by category.

Table 2.17 Median Nursing Facility Current Ratio Values (1990 - 1994)

	1990 (n) = 521 (%) ratio	1991 (n) = 512 (%) ratio	1992 (n) = 519 (%) ratio	1993 (n) = 505 (%) ratio	1994 (n) = 512 (%) ratio
Statewide	100%	100%	100%	100%	100%
Health Service Area					
I	13.6%	13.7%	13.7%	13.3%	13.9%
II	13.4%	12.9%	12.9%	13.9%	13.3%
III	8.8%	9.0%	9.1%	8.9%	8.6%
IV	33.6%	34.0%	33.5%	32.9%	33.0%
V	20.0%	20.0%	20.0%	20.4%	20.3%
VI	10.6%	10.4%	10.8%	10.7%	10.9%
Level of Care					
Skilled	10.2%	11.9%	15.0%	16.0%	17.4%
Intermediate	31.5%	29.9%	28.3%	25.7%	24.4%
Multi-level	57.5%	57.4%	55.9%	57.6%	57.4%
Pediatric	0.8%	0.8%	0.8%	0.6%	0.8%
Profit Status					
For-Profit	80.2%	77.9%	81.1%	79.0%	76.6%
Non-Profit	19.8%	22.1%	18.9%	21.0%	23.4%
Management Structure					
Management Co.	44.1%	43.6%	45.5%	39.6%	49.4%
Independent	55.9%	56.4%	54.5%	60.4%	50.6%

Source: Annual RSC-1 and RSC-2 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 and RSC-2 documents with the MRSC, statewide.

% values represent the proportion of facilities in each category. Ratio values are the median ratio value for this variable; statewide and by category.

Table 2.18 Median Nursing Facility (Long-Term) Debt to Asset Ratio Values (1990 - 1994)

	1990 (n) = 521 (%) ratio	1991 (n) = 512 (%) ratio	1992 (n) = 519 (%) ratio	1993 (n) = 505 (%) ratio	1994 (n) = 512 (%) ratio
Statewide	100%	0.371	100%	0.365	100%
Health Service Area					
I	13.6%	0.629	13.7%	0.546	13.9%
II	13.4%	0.359	12.9%	0.446	13.3%
III	8.8%	0.424	9.0%	0.363	8.6%
IV	33.6%	0.330	34.0%	0.331	33.0%
V	20.0%	0.367	20.0%	0.328	20.3%
VI	10.6%	0.371	10.4%	0.357	10.9%
Level of Care					
Skilled	10.2%	0.524	11.9%	0.506	17.4%
Intermediate	31.5%	0.236	29.9%	0.182	24.4%
Multi-level	57.5%	0.489	57.4%	0.527	57.4%
Pediatric	0.8%	0.216	0.8%	0.205	0.8%
Profit Status					
For-Profit	80.2%	0.364	77.9%	0.375	76.6%
Non-Profit	19.8%	0.403	22.1%	0.369	23.4%
Management Structure					
Management Co.	44.1%	0.486	43.6%	0.514	49.4%
Independent	55.9%	0.339	56.4%	0.322	50.6%

Source: Annual RSC-1 and RSC-2 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 and RSC-2 documents with the MRSC, statewide.

% values represent the proportion of facilities in each category. Ratio values are the median ratio value for this variable; statewide and by category.

Table 2.19 Median Nursing Facility Debt to Asset Ratio Values (1990 - 1994)

	1990 (n) = 521 (%) ratio	1991 (n) = 512 (%) ratio	1992 (n) = 519 (%) ratio	1993 (n) = 505 (%) ratio	1994 (n) = 512 (%) ratio
Statewide	100%	100%	100%	100%	100%
Health Service Area					
I	13.6%	13.7%	13.7%	13.3%	13.9%
II	13.4%	12.9%	12.9%	13.9%	13.3%
III	8.8%	9.0%	9.1%	8.9%	8.6%
IV	33.6%	34.0%	33.5%	32.9%	33.0%
V	20.0%	20.0%	20.0%	20.4%	20.3%
VI	10.6%	10.4%	10.8%	10.7%	10.9%
Level of Care					
Skilled	10.2%	11.9%	15.0%	16.0%	17.4%
Intermediate	31.5%	29.9%	28.3%	25.7%	24.4%
Multi-level	57.5%	57.4%	55.9%	57.6%	57.4%
Pediatric	0.8%	0.8%	0.8%	0.6%	0.8%
Profit Status					
For-Profit	80.2%	77.9%	81.1%	79.0%	76.6%
Non-Profit	19.8%	22.1%	18.9%	21.0%	23.4%
Management Structure					
Management Co.	44.1%	43.6%	45.5%	39.6%	49.4%
Independent	55.9%	56.4%	54.5%	60.4%	50.6%

Source: Annual RSC-1 and RSC-2 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 and RSC-2 documents with the MRSC, statewide.

% values represent the proportion of facilities in each category. Ratio values are the median ratio value for this variable; statewide and by category.

Table 2.20 Median Nursing Facility Return on Assets Ratio Values (1990 - 1994)

	1990 (n) = 521 (%) ratio	1991 (n) = 512 (%) ratio	1992 (n) = 519 (%) ratio	1993 (n) = 505 (%) ratio	1994 (n) = 512 (%) ratio
Statewide	100%	100%	100%	100%	100%
Health Service Area					
I	13.6%	13.7%	13.7%	13.3%	13.9%
II	13.4%	12.9%	12.9%	13.9%	13.3%
III	8.8%	9.0%	9.1%	8.9%	8.6%
IV	33.6%	34.0%	33.5%	32.9%	33.0%
V	20.0%	20.0%	20.0%	20.4%	20.3%
VI	10.6%	10.4%	10.8%	10.7%	10.9%
Level of Care					
Skilled	10.2%	11.9%	15.0%	16.0%	17.4%
Intermediate	31.5%	29.9%	28.3%	25.7%	24.4%
Multi-level	57.5%	57.4%	55.9%	57.6%	57.4%
Pediatric	0.8%	0.8%	0.8%	0.6%	0.8%
Profit Status					
For-Profit	80.2%	77.9%	81.1%	79.0%	76.6%
Non-Profit	19.8%	22.1%	18.9%	21.0%	23.4%
Management Structure					
Management Co.	44.1%	43.6%	45.5%	39.6%	49.4%
Independent	55.9%	56.4%	54.5%	60.4%	50.6%

Source: Annual RSC-1 and RSC-2 Cost Report filings to the Massachusetts Rate Setting Commission (MRSC).

Notes: n values represent the number of facilities filing accurate RSC-1 and RSC-2 documents with the MRSC, statewide.

% values represent the proportion of facilities in each category. Ratio values are the median ratio value for this variable; statewide and by category.

Section 3: Resident Demographics and Clinical Characteristics (1991 - 1994)

Table 3.1 Proportion of Medicaid-Funded Nursing Facility Residents by Demographic Indicators (1991 - 1994)

Demographic Indicators	1991 (n) = 37,762 (%)	1992 (n) = 37,987 (%)	1993 (n) = 34,912 (%)	1994 (n) = 37,971 (%)
Gender				
Male	21.7%	21.3%	21.0%	21.8%
Female	78.3%	78.7%	79.0%	78.2%
Race				
White	97.1%	96.8%	96.5%	95.9%
Non-White	2.9%	3.2%	3.5%	4.1%
Level of Care				
Skilled	10.0%	12.6%	12.3%	13.8%
Intermediate	18.6%	17.5%	16.0%	14.4%
Multi-level	71.4%	69.9%	71.7%	71.8%
Age				
< 65	5.0%	5.0%	4.9%	5.5%
65 - 74	11.6%	11.2%	10.9%	11.1%
75 - 84	31.3%	30.7%	30.6%	30.4%
85 +	52.1%	53.1%	53.6%	53.0%

Source: Quarter 4 Management Minute Questionnaire (MMQ) data filed by facilities with the Division of Medical Assistance.

Notes: n values represent the number of Medicaid-funded nursing facility residents, with reliable data for the period, statewide.

% values represent the proportion of the Medicaid-funded residents in each category.

Table 3.2 Proportion of Medicaid-Funded Nursing Facility Residents by Health and Behavior Indicators (1991 - 1994)

Health and Behavior Indicators	1991 (n) = 37,762 (%)	1992 (n) = 37,987 (%)	1993 (n) = 34,912 (%)	1994 (n) = 37,971 (%)
Immobility	31.7%	35.0%	37.0%	38.9%
Spasticity/Rigidity	8.5%	8.8%	7.2%	5.8%
Behavioral Problems	20.4%	20.1%	18.0%	14.3%
Isolation	0.3%	0.4%	0.3%	0.2%
Disoriented	62.1%	64.1%	65.0%	64.2%
Restraint Use				
Ordered-Not Used Daily	10.7%	8.1%	6.0%	4.6%
Ordered-Used Daily	17.9%	17.6%	22.1%	26.4%
Activity Level				
Active	23.2%	21.8%	21.3%	21.4%
Occasionally Active	41.3%	44.1%	45.9%	47.1%
Rarely Active	32.8%	31.4%	30.3%	29.3%

Source: Quarter 4 Management Minute Questionnaire (MMQ) data filed by facilities with the Division of Medical Assistance.

Notes: n values represent the number of Medicaid-funded nursing facility residents, with reliable data for the period, statewide.

% values represent the proportion of the Medicaid-funded residents in each category.

Percentages do not sum to 100 due to conditions/levels not reported in this table.

Characteristics and Activity Levels are defined in Appendix 4.

**Table 3.3 Proportion of Medicaid-Funded Nursing Facility Residents
by Dependency Level for Certain Activities of Daily Living (ADLs) (1991 - 1994)**

Activities of Daily Living		1991 (n) = 37,762 (%)	1992 (n) = 37,987 (%)	1993 (n) = 34,912 (%)	1994 (n) = 34,971 (%)
Bathing:	Independent	8.9%	7.8%	7.6%	8.8%
	Assist	35.6%	35.2%	34.1%	33.3%
Totally Dependent		55.5%	57.0%	58.3%	57.9%
Dressing:	Independent	12.0%	10.3%	9.7%	10.7%
	Assist	32.3%	32.9%	32.7%	31.9%
Totally Dependent		54.0%	55.4%	56.3%	56.1%
Eating:	Independent	54.5%	50.8%	49.9%	53.5%
	Assist	26.5%	29.4%	29.4%	25.9%
Totally Dependent		16.6%	17.3%	17.9%	17.5%
Tube Fed and/or I.V.		2.2%	2.4%	2.7%	2.9%
Toilet Use:	Independent	30.4%	27.5%	26.1%	25.4%
	Assist	31.2%	32.8%	33.8%	34.1%
Totally dependent		25.6%	26.8%	27.2%	26.8%
Incontinence:	with bladder with bowel	59.2%	61.9%	62.9%	62.4%
		54.2%	56.1%	56.4%	55.9%

Source: Quarter 4 Management Minute Questionnaire (MMQ) data filed by facilities with the Division of Medical Assistance.

Notes: n values represent the number of Medicaid-funded residents, with reliable data for the period, statewide.

% values represent the proportion of the Medicaid-funded nursing facility residents by category, within each ADL item.

Percentages may not sum to 100 due to conditions/levels not reported in this table. Activities of Daily Living are defined in Appendix 4.

Table 3.4 Proportion of Medicaid-Funded Nursing Facility Residents by Number of ADL Dependencies (1991 - 1994)

Number of ADL Dependencies	1991 (n) = 37,762 (%)	1992 (n) = 37,987 (%)	1993 (n) = 34,912 (%)	1994 (n) = 37,971 (%)
0	6.7%	5.6%	5.3%	6.3%
1	4.6%	3.9%	3.5%	3.3%
2	10.1%	8.8%	8.0%	7.8%
3	7.0%	6.8%	6.8%	6.3%
4	8.0%	7.9%	8.1%	7.6%
5	14.8%	14.2%	13.5%	14.6%
6	25.7%	26.3%	27.1%	27.5%
7	23.1%	26.5%	27.7%	26.6%

Source: Quarter 4 Management Minute Questionnaire (MMQ) data filed by facilities with the Division of Medical Assistance.

Notes: n values represent the number of Medicaid-funded residents, with reliable data for the period, statewide.

% values represent the proportion of the Medicaid-funded nursing facilities residents, having that number of ADL dependencies.

The following MMQ codes are regarded as "dependent" for each of the ADLs: Bathing (2,3), Dressing (2,3), Mobility (3,4), Eating (2,3,4,5,6,7,8.), Continent (3,4,5,6), Toilet Use (2,3) and Transfer (2,3).

Table 3.5 Mean MMQ Score for Medicaid-Funded Nursing Facility Residents by Demographic Indicators (1991 - 1994)

Demographic Indicators	1991 (n) = 37,762		1992 (n) = 37,987		1993 (n) = 34,912		1994 (n) = 37,971	
	Mean Minutes	Standard Deviation	Mean Minutes	Standard Deviation	Mean Minutes	Standard Deviation	Mean Minutes	Standard Deviation
Industry	180.1	(84.9)	188.6	(84.2)	191.1	(83.4)	185.7	(83.5)
Gender	173.5	(86.0)	182.6	(86.3)	185.7	(85.0)	178.7	(85.5)
	181.9	(84.5)	190.2	(83.5)	192.5	(82.9)	187.6	(82.8)
Race	179.9	(84.8)	188.4	(84.1)	190.7	(83.4)	185.5	(83.2)
	183.4	(87.0)	195.6	(87.5)	200.3	(84.9)	190.0	(88.7)
Level of Care	205.1	(79.6)	206.6	(81.9)	206.6	(83.3)	191.4	(85.3)
	150.2	(78.0)	164.0	(79.7)	171.6	(80.4)	170.7	(82.5)
	184.3	(85.3)	191.5	(84.4)	192.8	(83.3)	187.5	(82.9)
Age	165.8	(92.0)	178.0	(91.8)	184.4	(90.5)	173.6	(92.5)
	169.6	(86.7)	178.4	(86.7)	180.8	(87.0)	175.2	(86.5)
	177.9	(84.8)	187.2	(84.4)	190.0	(83.6)	184.3	(83.9)
	185.1	(83.3)	192.5	(82.5)	194.4	(81.7)	189.8	(81.2)

Source: Quarter 4 Management Minute Questionnaire (MMQ) data filed for each year by facilities, with the Division of Medical Assistance.

Notes: n values represent the number of Medicaid-funded nursing facility residents with reliable data for the period, statewide.

Mean minutes values are the mean MMQ scores for Medicaid-funded residents in that category.

Standard deviation values are the measure of dispersion of the MMQ scores. An explanation of these measures is provided in Appendix 3.

Table 3.6 Ten Most Frequent Primary Diagnoses of Medicaid-Funded Nursing Facility Residents (1991 - 1994)

1991 (n) = 37,762		1992 (n) = 37,987		1993 (n) = 34,912		1994 (n) = 37,971	
Diagnosis	Freq. %	Diagnosis	Freq. %	Diagnosis	Freq. %	Diagnosis	Freq. %
Alzheimer's disease	18.9%	Alzheimer's disease	19.4%	Alzheimer's disease	19.6%	Alzheimer's disease	19.5%
Cerebrovascular disease	8.9%	Cerebrovascular disease	8.6%	Cerebrovascular disease	8.4%	Cerebrovascular disease	8.4%
Diabetes	5.4%	Diabetes	5.5%	Diabetes	5.4%	Diabetes	5.3%
Schizophrenic disorders	3.8%	Congestive heart failure	3.7%	Congestive heart failure	3.6%	Congestive heart failure	3.7%
Congestive heart failure	3.7%	Schizophrenic disorders	3.6%	Hypertension	3.6%	Hip fracture	3.7%
Hypertension	3.7%	Hypertension	3.6%	Hip fracture	3.6%	Hypertension	3.7%
Ischemic heart disease	3.0%	Hip fracture	3.3%	Schizophrenic disorders	3.4%	Schizophrenic disorders	3.3%
Hip fracture	2.9%	Ischemic heart disease	2.6%	Ischemic heart disease	2.4%	Mentally ill	2.8%
Parkinson's disease	2.5%	Parkinson's disease	2.5%	Parkinson's disease	2.4%	Parkinson's disease	2.4%
Chronic airway obstruction	2.3%	Mentally ill	2.5%	Mentally ill	2.6%	Chronic airway obstruction	2.3%

Source: Quarter 4 Management Minute Questionnaire data filed by facilities for each year with the Division of Medical Assistance.
 Notes: n values represent the number of Medicaid-funded nursing facility residents with reliable data for the period, statewide.

% values represent the frequency that a given diagnosis was the primary diagnosis for Medicaid-funded residents.

ICD-9 Codes: Alzheimer 290.331 Hypertension 401
 Cerebrovascular disease 436,437,438 Ischemic heart disease 414
 Chronic airway obstruction 496 Mentally ill 298
 Congestive heart failure 428 Parkinson's disease 332
 Diabetes 250 Schizophrenic disorders 295
 Hip Fracture 820

**Table 3.7 Proportion of Medicaid-Funded Nursing Facility Residents
with a Primary Diagnosis of Alzheimer's Disease by Demographic Indicators (1991 - 1994)**

Demographic Indicators	1991 (n) = 7,133 (%)	1992 (n) = 7,352 (%)	1993 (n) = 6,845 (%)	1994 (n) = 7,397 (%)
Gender				
Male	18.0%	17.5%	17.2%	17.4%
Female	82.0%	82.5%	82.8%	82.6%
Race				
White	97.0%	96.8%	96.7%	96.2%
Non-White	3.0%	3.2%	3.3%	3.8%
Level of Care				
Skilled	8.1%	10.7%	10.8%	12.0%
Intermediate	16.5%	16.4%	14.4%	14.4%
Multi-level	75.4%	72.9%	74.8%	73.6%
Age				
< 65	1.6%	1.4%	1.6%	1.7%
65 - 74	8.5%	8.3%	7.6%	8.1%
75 - 84	35.1%	33.3%	33.6%	34.0%
85 +	54.9%	57.0%	57.1%	56.2%

Source: Quarter 4 Management Minute Questionnaire data filed by facilities for each year with the Division of Medical Assistance.

Notes: n values represent the number of Medicaid-funded nursing facility residents with reliable data for the period, statewide.

% values represent the proportion of the Medicaid-funded residents with a primary diagnosis of Alzheimer's disease, in each category.

**Table 3.8 Proportion of Medicaid-Funded Nursing Facility Residents
with a Primary Diagnosis of Alzheimer's Disease by Number of ADL Dependencies (1991 - 1994)**

Number of ADL Dependencies	1991 (n) = 7,133 (%)	1992 (n) = 7,352 (%)	1993 (n) = 6,845 (%)	1994 (n) = 7,397 (%)
0	2.3%	1.9%	1.8%	2.2%
1	1.9%	1.5%	1.5%	1.3%
2	6.8%	5.6%	4.9%	5.7%
3	5.7%	5.7%	5.7%	4.8%
4	6.3%	5.9%	5.8%	5.7%
5	9.8%	9.2%	7.6%	9.2%
6	29.1%	28.6%	28.8%	29.6%
7	38.1%	41.6%	44.0%	41.4%

Source: Quarter 4 Management Minute Questionnaire data filed by facilities for each year with the Division of Medical Assistance.

Notes: n values represent the number of Medicaid-funded residents with reliable data for the period, statewide.
% values represent the proportion of the Medicaid-funded nursing facility residents, with a primary diagnosis of Alzheimer's disease, having that number of ADL dependencies.
The following MMQ codes are regarded as "dependent" for each of the ADLs: Bathing (2,3), Dressing (2,3), Mobility (3,4), Eating (2,3,4,5,6,7,8), Continent (3,4,5,6), Toilet Use (2,3) and Transfer (2,3).

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